

PREA AUDIT REPORT Interim Final

ADULT PRISONS & JAILS

Date of revised report:

February 15, 2017

Auditor Information			
Auditor name: Maggie Capel			
Address: 704 West Partridge Drive, Fayetteville, AR 72701			
Email: Maggie.capel@att.net			
Telephone number: 479-263-4327			
Date of facility visit: December 14, 2016 through December 16, 2016			
Facility Information			
Facility name: Price Daniel Unit			
Facility physical address: 938 South FM 1673 Snyder, Texas 79549			
Facility mailing address: <i>(if different from above)</i> Click here to enter text.			
Facility telephone number: (325) 573-1114			
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Beth Morris			
Number of staff assigned to the facility in the last 12 months: 374			
Designed facility capacity: 1384			
Current population of facility: 1352			
Facility security levels/inmate custody levels: G1, G2, G4			
Age range of the population: 18 - 81			
Name of PREA Compliance Manager: Robert Thompson		Title: Unit Safe Prisons PREA Manager	
Email address: Robert.Thompson@tdcj.texas.gov		Telephone number: (325) 573-1114	
Agency Information			
Name of agency: Texas Department of Criminal Justice			
Governing authority or parent agency: <i>(if applicable)</i> State of Texas			
Physical address: 861-B I-45 North, Huntsville, Texas 77320			
Mailing address: <i>(if different from above)</i> P.O. Box 99, Huntsville, Texas 77320			
Telephone number: (936) 295-6371			
Agency Chief Executive Officer			
Name: Bryan Collier		Title: Executive Director	
Email address: Bryan.Collier@tdcj.texas.gov		Telephone number: (936) 437-2101	
Agency-Wide PREA Coordinator			
Name: Lori Davis		Title: Director, Correctional Institutions Division	
Email address: Lori.Davis.TDCJ.Texas.gov		Telephone number: (936) 437-2170	

AUDIT FINDINGS

NARRATIVE

The Prison Rape Elimination Act (PREA) on-site audit of the Price Daniel Unit in Snyder, Texas was conducted on December 14 - 16, 2016. The contract for the audit was between the Texas Department of Criminal Justice and the American Correction Association. During the same week of the audit, an ACA reaccreditation audit was also conducted from December 13, 2016 through the morning of December 16, 2016. The American Correction Association assigned this auditor to participate in the reaccreditation audit and to conduct the PREA audit.

Prior to the on-site audit, the agency provided a jump drive which included the completed Pre-Audit Questionnaire and supporting documentation. A prior interview with the executive staff was also included. After review of the documentation, several phone calls with the Warden and PREA Manager followed to address questions, requesting additional documentation and to plan the audit. An email from the Trans Pride Initiative was forward to this auditor by the PREA Resource Center. The email expressed general and specific concerns about the management and treatment of transgender offenders in the Texas Department of Criminal Justice. The email did not express specific concerns related to the Daniel Unit but rather examples of complaints received about different facilities. These concerns were considered during the audit. This auditor did not find any violations at the Daniel Unit of the alleged violations noted in the email.

During the two and one-half days of the on-site audit, there were 27 confidential formal offender interviews completed, one from each housing area, and several informal offender interviews. There was also 29 staff interviews conducted. Interviews included officers and supervisors from each of the shifts and specialty staff. Only the dorm style housing areas have cameras in the pod. These cameras were observed to assess privacy and potential blind spots. Shift logs, housing area sign in documents, training records, and documents from the personnel record, investigations, and other pertinent documents were reviewed.

A tour of the facility was conducted during the ACA tour and specific areas were revisited during the PREA audit by this auditor. The location of cameras and mirrors, security staff placement and supervision, and shower, dressing and toilet placement in housing, work, education and program areas was inspected with no problems noted. Notice of the PREA audit was observed throughout the facility.

Following the site visit, this auditor worked with the facility to comply with standards regarding the use of offender interpreters and Offender Victim Representatives. The facility provided additional training for security staff regarding the use of offender interpreters. The facility provided shift reports and training logs to verify the training. The facility also provided refresher training for Offender Victim Representatives and the Warden issued a memorandum requiring biannual refresher training for staff in the roles of OVR.

In addition to the above, the facility provided additional documentation and provided further clarification for the auditor regarding PREA practices at the facility. The facility is in full compliance with the PREA standards.

After submitting the final report, the agency contacted this auditor about concerns over some typing errors and questioned the auditor about a statement in the report regarding the results of an investigation. This auditor corrected the typing errors and agreed with the agency that an error was made regarding the outcome of a specific investigation. The report was revised and resubmitted on February 15, 2017.

DESCRIPTION OF FACILITY CHARACTERISTICS

The mission of the Texas Department of Criminal Justice is, "to provide public safety, promote positive change in offender behavior, reintegrate offenders into society, and assist victims of crime."

The mission of the Daniel Unit is, "to perpetuate the high level of security set as standards by the ACA and TDCJ-CID in order to sustain the safety of both our employees and our community. As a team we strive to build and maintain a system that will effectively and efficiently create an atmosphere for offenders that is conducive to promoting their work skills and rehabilitation in an effort to reduce the rate of recidivism."

The PDU is a closed secured compound enclosed by double perimeter fences enhanced by razor wire. The Windham School District (WSD) out of Huntsville, Texas provides educational services to TDCJ facilities and is present at the PDU. Medical services at the PDU are contracted through the Texas Tech University Health Sciences Center (Texas Tech).

There are 14 buildings inside the secure perimeter fence: administration, Chapel, Education, Services, Administrative segregation unit, computer recovery building, line control/count room, J1-J5 dormitories, gymnasium, and maintenance.

The Daniel Unit offers programs and services to include food services, medical care, dental care, recreation, multi-denominational religious programs and services, work programs, academic and vocational education, visitation, social and mental health services, library, laundry, commissary, mail and telephone access.

Housing areas J1 – J4 are comprised of two man cells and a control center which allows for viewing in the shower area, day rooms and all cell doors. Toilets are provided inside each cell. There is a rectangular window in each cell. Showers are single man units with metal partial walls separating each shower and individual shower doors. This allows for privacy for dressing and undressing and showering. Gender announcements were reported by staff and offenders and observed during the audit. Officers are present in the control center and on the floor and perform frequent security checks of each pod. Housing area J-5 is an open barracks design with a partial upper tier. There is a three quarter wall in the shower and toilet area. Shower curtains are provided to afford privacy while showering and dressing. This area was viewed from several perspectives to include from the control center, day room area, and lower and upper tiers. Adequate privacy is afforded offenders housed in these areas. Toilet and strip search areas were inspected in the work, program and education areas with no concerns noted.

SUMMARY OF AUDIT FINDINGS

Number of standards exceeded:	0
Number of standards met:	41
Number of standards not met:	0
Number of standards not applicable:	2

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Executive Order 3.03, SAFE Prisons /PREA Program states, the agency has zero tolerance for all forms of sexual abuse and sexual harassment. The order states the TDCJ will be vigilant in creating a safe environment for staff and offenders. The Safe Prison PREA Plan outlines the agency's proactive approach for prevention, detection, and punishment for sexual abuse and sexual harassment. This plan includes definitions of prohibited behaviors, and sanctions for offenders, staff, volunteers, and contractors who engage in sexual abuse.

This order appoints the Director of the Correctional Institution Division, as the agency-wide PREA Coordinator. The Correctional Institution Director (CID) reports directly to the Executive Director. The Safe Prison PREA Manager (SPPM) reports to the Deputy Director of Management Operations, who in turn reports to the CID.

The PREA Coordinator is tasked with the development of the TDCJ SAFE Prisons/PREA program. A Safe Prison/PREA Program Office (SPPMO) has been established at the agency's central office. This office is responsible for monitoring the incidence of offender sexual abuse and providing statistical analysis regarding the frequency of reports. The agency Safe Prison PREA Manager (SPPM) directs this office. The SPPM coordinates assists and provides technical assistance to the facilities to comply with the Safe Prison/PREA Plan. The SPPM works directly with Regional Safe Prison/PREA Managers (RSPPM). The RSPPM assists with the implementation and monitoring of the Safe Prison PREA Plan within the assigned region.

Unit Safe Prison PREA Managers are assigned to each facility. The Unit Safe Prison/PREA Manager is provided dual supervision by the facility Warden and the Regional Safe Prison/PREA Manager. The facility Warden assigned Sgt. Robert Thompson to serve as the Unit Safe Prison/PREA Manager. Sgt. Thompson has sufficient time and authority to coordinate the facility's PREA responsibilities.

An interview with Lorie Davis, Director of the Correctional Institution Division was completed by Barbara King (auditor) on September 27, 2016 and provided to this auditor. Ms. Davis is also appointed the agency PREA Coordinator and was interviewed in this capacity as well. Ms. Davis explained that the daily functions of the Safe Prison PREA program are managed through the agency Safe Prison PREA Manager. There are six regional Safe Prison PREA Managers who are supervised by the agency Safe Prison PREA Manager and the Regional Directors. The PREA Compliance Manager was also interviewed and confirmed compliance with this standard.

The agency is in compliance with this standard.

Compliance Determined By:

Executive Directive 03.03, Safe Prisons/PREA Program
Safe Prisons PREA Plan
Organizational Chart
Interview with PREA Coordinator
Interview with PREA Compliance Manager

Standard 115.12 Contracting with other entities for the confinement of inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency directives and policies mandate that any new contract or contract renewal for the confinement of offenders requires the adoption and compliance with TDCJ policies and procedures, which includes compliance with the PREA standards. The agency assigns a facility contract monitor to monitor compliance with all contract requirements, including the PREA standards. The contractor must also employ a PREA Manager at each facility.

There are 15 contracts for the confinement of offenders. The agency provided partial documents from each contract. Each contract included the requirement that the contractor comply with the PREA standards. Contracts also required the contractor to report any incidents of sexual harassment or sexual assault to the agency and that compliance with the PREA standards will be monitored by the designated contract monitor. Although the Daniel Unit is a state facility, the State of Texas does contract for the confinement of offenders. The agency requires all completed PREA audit reports to be sent to the TDCJ.

Of the 15 contract facility, 14 have completed PREA compliance audit. One facility is in the monitoring phase. The contract administrator, Cody Ginsel, was interviewed on September 27, 2016 by Barbara King. A copy of this interview was provided and reviewed for this audit. The facility is in compliance with this standard.

Compliance Determined By:

Review of private prison contracts
Prior interview with the agency contract administrator

Standard 115.13 Supervision and monitoring

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Security Operations Office monitors and directs staffing plans and shift rosters for all facilities. Shift turnout rosters are developed from the staffing plan. The Security Operations Office is the only department authorized to make changes to the shift rosters. The Warden may request changes by submitting a request to the Security Operations Office.

The staffing plan designates security posts as priority one and priority two posts. All priority one posts must be manned at all times. Staff assigned to priority two posts may be reassigned as needed to staff priority one posts. In the event priority one posts cannot be filled, the Duty Officer must contact the Regional Director. A determination will be made if overtime should be authorized or other operational considerations should be implemented.

The staffing plan takes into consideration generally accepted detention practices, findings of inadequacies from internal or external oversight bodies, the physical plant with emphasis on blind spots, and areas where staff or offenders may be isolated, composition of the offender population and the number and placement of supervisor staff. The plan also considers any judicial findings or findings from federal investigative agencies. There are no such findings during this audit period.

The staffing plan was predicated on the facility capacity of 1,384 offenders. The average daily offender population is 1,353. The staffing plan is reviewed annually by the Security Operations Office in consultation with the Regional Office and the agency PREA Manager. The review includes a review of the physical plant, the number and placement of video monitoring, the number and placement of supervisory staff, institutional programs or activities, prevalence of substantiated and unsubstantiated reports of sexual abuse from the prior year, findings of inadequacies from the judicial system or federal investigative bodies, internal audits, and other operational considerations.

The Price Daniel Unit staffing plan was reviewed on May 3, 2016. The following staff was in attendance:

- Regional Director
- Senior Warden
- Security Operations Warden
- Safe Prison PREA Manager
- Security Operations Staffing Coordinator
- PS V Video Surveillance

It was determined there were no changes necessary to the unit's staffing plan or shift turnout rosters, video surveillance was adequate, and the unit is using all resources to ensure adequate security staff is available to meet the requirements of the staffing plan. The staffing plan, staffing plan reviews, and shift turnout rosters were reviewed and reflect compliance with this provision of the standard. In the past year, the most common reasons the facility may deviate from the staffing plan is staff shortage, hospital escorts, direct observation, and crisis management escorts.

During interviews with the deputy Warden, major, and intermediate staff explained the process for conducting and documenting unannounced rounds. The security major, captains, lieutenants, and sergeants are required to conduct unannounced rounds on each shift. Shift supervisors document these rounds on the Shift Turnout Roster. The Warden, deputy Warden, major and captains document all rounds in each housing area log book. The post orders for each of these positions were reviewed and reflect this requirement. A review of turnout rosters and interviews with security officers and supervisors confirm that unannounced rounds are conducted and documented as required by this standard provision. The agency policy prohibits alerting other staff of unannounced rounds.

The Warden explained the process for obtaining additional positions if needed. She also confirmed that staffing levels, video surveillance, and use of available resources are reviewed following an investigation of sexual abuse. Shift supervisors are required to document any time there is a change in the shift roster. The most common reasons for deviating from the staffing plan are staff shortages, hospital escorts, direct observation, and case management transports.

The facility complies with this standard.

Compliance Determined by:

- Review of the staffing plan and staffing plan review
- Post orders for security supervisors
- Administrative Directive 11.52, Security Staffing

Security Operations Procedures 08.01, Turnout Roster Management
Security Operations Procedures 08.06, Security Operations Annual Review of Turnout Roster Procedures
Security Operations Procedures 07.02, Deletions, New Installation, or Relocation of Video Surveillance Equipment
Interview of the Warden, PREA coordinator, PREA Compliance Manager and intermediate and higher level facility staff

Standard 115.14 Youthful inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)
- Not Applicable

Unit Classification Procedure 4.19 directs that all male youthful offenders are assigned to the Clemens and Byrd facilities. All female youthful offenders are housed at the Hilltop unit. Youthful offenders are not housed at the Price Daniel Unit facility. This standard is not applicable.

Compliance Determined By:

Unit Classification Procedures 4.19, Youthful Offenders
Daily Population Reports

Standard 115.15 Limits to cross-gender viewing and searches

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency policy mandates that strip searches and body cavity searches must be conducted by staff of the same gender as the offender, except in extraordinary circumstances. Opposite gender strip searches must be approved by a supervisor and documented by the shift supervisor on an Interoffice Communication Form. This documentation is forwarded to the Unit Safe Prison PREA Manager. Cross gender strip searches are also documented on a Cross Gender Search Log.

The PAQ indicates there were six cross gender strip searches conducted by female (non-medical) staff and that none of these searches were conducted for exigent circumstances. In the past, female correctional officers attending the academy were required to strip search a male offender to demonstrate proficiency in the event the officer was required to conduct such a search in exigent circumstances. This practice was addressed in an earlier audit and has since been discontinued.

The Price Daniel Unit is an all-male facility. Standard provisions 115.15 (B) and (C-2) relate to female offenders and do not apply to this facility

The facility post orders include instructions for opposite gender staff to announce their presence. This was observed on the tour and during the reaccreditation audit earlier in the week and confirmed through interviews with random staff and offenders

The Safe Prison/PREA Plan requires that correctional officers must make their best effort to afford offenders privacy when showering, performing bodily functions, and changing clothing, except in exigent circumstances. During the facility tour, shower and toilet areas were observed. Officers are not stationed in the housing pods but rather make regular checks and counts throughout the day. The shower and toilet area in the open bay housing units provide a partial wall and shower curtains. The two man cell areas have showers with partial doors and toilets inside each cell. The closed pods and two man cell pods afforded the required privacy for offenders. There was one complaint about privacy in a work area. This auditor rechecked this area and found it to be in compliance with this standard. Interviews with random staff and offenders confirm that inmates are afforded privacy from viewing by the female staff.

Staff is prohibited from searching or examining a transgender or intersex offender solely to determine their gender status. The Safe Prison PREA Plan states that gender status may be determined through conversations with the offender, review of medical records, or through a private medical exam conducted by a medical practitioner. Interviews with staff and transgender offenders confirmed that this is the practice at this facility.

The curriculum for the pre-service training course entitled, Contraband and Shakedown was reviewed. The training addresses the proper searching of male and female offenders, as well as transgender and intersex offenders. The PAQ states 100 % of all security staff have been trained to conduct cross gender pat down searches and searches of transgender and intersex offenders. A review of training records supports compliance with this standard.

Compliance Determined By:

AD 03.22, Offender Searches
Safe Prison PREA Plan
Post Orders
CTSD Curriculum, Contraband and Shakedowns
Interviews with random staff and offenders
Observations on the facility tour
Review of training records

Standard 115.16 Inmates with disabilities and inmates who are limited English proficient

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency has provisions to ensure all offenders have access to PREA information concerning prevention, detection, and response to sexual abuse, and sexual harassment. Offenders who are deaf or visually impaired, limited English proficient, or otherwise disabled are provided information in formats the offender can understand.

The agency provides interpretive services for Spanish speaking offenders through trained staff within the agency. To qualify to be an interpreter, staff must score at Level 4 or 5 on the Language

Assessment Skills - Spanish Oral Proficiency test. If an offender speaks a language other than Spanish, the facility contacts Martha Layman who is in charge of interpreter services for the agency. The agency maintains a listing of bi-lingual employees throughout the agency who speak languages other than Spanish and who can assist in the event of an emergency. The medical department provides a separate interpretive service through Pacific Interpreters. PREA information is available to offenders through a video which provides closed captioning and through numerous English and Spanish signs placed throughout the facility.

PREA information is available to offenders through a video which provides closed captioning and through numerous English and Spanish signs placed throughout the facility. Offenders who are blind, deaf, or seriously mentally ill are not housed at this facility. This auditor assessed compliance in part through an interview with a non-English offender with assistance from a trained interpreter.

Zero tolerance postings are required throughout the facility in English and Spanish. At a minimum, this information must be posted in the following areas: Warden's Office, Employee break rooms, offender and employee dining rooms, law library, general library, housing areas, offender work and educational areas, visitation areas, and other areas as determined by the Warden. The agency also approved and provides additional creative postings that address PREA information regarding zero tolerance, and reporting procedures. An 8" X 10" posting was observed in each area.

During the random staff interviews, some staff indicated that it was acceptable to use an offender interpreter when an inmate is making a report of sexual abuse or sexual harassment. To address this issue, this auditor asked that additional training specific to the use of inmate interpreters be provided to staff. The facility provided this training to all shifts and provided shift reports and training attendance rosters. After review of the documentation, this auditor finds the facility in compliance with this standard.

Compliance Determined by:

AD 04.25, Language Assistance Services to Offenders
AD 06.25, Qualified Interpreter Services – ASL
CMHC G-51.1, Offenders with Special Needs
CMHC G-51.5, Certified American Sign Language Services (ASL) Interpreter Services
SPPOM 02.03, Safe Prison/PREA Postings and Brochures
Tour observations of PREA Postings in English and Spanish
Interviews with the agency head, non-English speaking offender, random staff
Use of a trained staff interpreter during an interview with a non-English speaking offender
Review of Shift reports and training rosters

Standard 115.17 Hiring and promotion decisions

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency policies do not allow the hiring of an employee or contractor or promotion of an employee who may have contact with offenders who have engaged in sexual abuse in prison, jail, lockup, community confinement, or juvenile facilities or who have been administratively or civilly adjudicated

to have engaged in these activities. The agency has a system of collecting criminal information concerning contractors and employees on a daily basis.

The Human Resource department for the agency collects pre-employment information and completes criminal background checks. This auditor reviewed a listing of newly hired employees to include date of hire and date of background check. The Human Resource department contacts previous institutional employers and asks about misconduct and about resignations in lieu of termination for conduct outlined in this standard. This information is documented. The agency also provides this information to institutional employers upon request. A random selection of records revealed that criminal background checks are conducted as required in this standard provision.

The agency also considers acts of sexual abuse or harassment when making promotion decisions. Employees have a continuing duty to report such information. Failure to disclose such information during employment with the agency is grounds for termination. Annually staff attends Safe Prison/PREA training and watches a video concerning PREA. Following this training, staff signs an acknowledgement form in which they are asked each of the questions outlined in 115.17 (a). Several signed Acknowledgment forms were reviewed.

Compliance Determined by:

Staff PREA Training Acknowledgment
Employment Application and Supplement
Executive Directive PD-27, Employment Status Pending Resolution of Criminal Charges or Protective Orders
Executive Directive PD-71, Selection System Procedures
Executive Directive PD-73, Selection Criteria for Correctional Officer Applicants
Executive Directive PD-75, Applicants with Pending Criminal Charges or Prior Criminal Convictions
Safe Prison PREA Plan
Redacted documentation of Criminal Background Checks
Interview with Human Resource staff
Review of New Hire listing to include date of hire, date of background check and acknowledgement forms

Standard 115.18 Upgrades to facilities and technologies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The PAQ states and the Warden confirmed the facility has not made any substantial expansions or modifications to the facility since August 2012. The facility has 51 cameras, 5 TV monitors, 2 DVR's and 3 VSUS. There are cameras in the open dorm pods. Camera viewing was checked and confirmed that the cameras provided good visibility into the offender living area but did not present privacy issues. There are no cameras in the cell blocks.

The Warden explained the process for requesting additional video equipment and explained the use of the existing equipment.

Compliance Determined by:

Security Operations Procedures Manual 07.02, Deletion, New Installation, or Relocation of Video Surveillance Equipment
Security Memorandum 01.14, Operating and Monitoring Video Surveillance Systems
Interview with the Warden
Observations during the facility tour
Informal discussions with facility staff

Standard 115.21 Evidence protocol and forensic medical examinations

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency is responsible for conducting administrative and criminal investigations of sexual abuse to include offender-on-offender sexual abuse and staff-on-offender sexual abuse, sexual harassment, and sexual misconduct. All allegations of sexual abuse or harassment are referred to the Office of the Inspector General. The Office of the Inspector General conducts all criminal investigations. Facility investigators conduct all administrative investigations.

Agency directives provide excellent procedures for collecting and preserving evidence and securing a crime scene. Sexual assault investigations comply with the Department of Justice Office on Violence against Women publication, A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents, second edition. Youthful offenders are not housed at this facility, so this provision of the standard is not applicable. Investigators from the Office of the Inspector General and the facility were interviewed.

State law requires that one or more healthcare facilities will be designated as the primary healthcare facility for the community. The designated healthcare facility is required to provide emergency medical services and evidence collection for sexual assault survivors on a community or area wide basis. The law affords the survivor the right to a forensic medical exam, a private area, if available, to wait or to speak to medical, legal, or sexual assault crisis center staff or volunteer until a physician, nurse or physician assistant is ready to treat the survivor. Those that perform the forensic medical exam are required to have basic forensic evidence collection training that is approved or recognized by the appropriate licensing board. Victims are not charged for medical care or forensic exams related to the sexual assault. Hendriks Hospital in Abilene, Texas provides forensic exams for sexual assault or abuse victims from the facility. The emergency department was contacted and confirmed that SANE nurses are available to provide services for the facility.

The agency has made efforts to access the services of rape crisis centers statewide. The previous Corrections Institutional Division Director and agency Safe Prison PREA manager sent a letter requesting sexual assault victim advocacy services to all rape crisis centers throughout Texas associated with the Texas Association against Sexual Assault. This letter explained the requirements of the PREA law and requested a partnership to provide services for victims within the agency. Some rape crisis centers responded and entered into a Memorandum of Understanding with the TDCJ to provide services. There was no affirmative response for rape crisis centers in the area of the Daniel facility. More recently the agency Safe Prison PREA Manager and PREA Ombudsman led a workshop at the 2016 annual TAASA (Texas Association against Sexual Assault) conference. The workshop provided a general overview of the Prison Rape Elimination Act. The national standards were reviewed, with special attention to the standards that required partnering with rape crisis centers and providing victim advocacy services. The workshop included discussions about various

partnerships to include MOU's with the TDCJ.

The agency trained employees to provide victim advocacy services. The trained Offender Victim Representatives are available to accompany the offender to the hospital and to provide support services through the investigation process. An interview was conducted with an Offender Victim Representative and training records were reviewed. Following the interview, the facility was asked to provide a refresher training class for Offender Victim Advocates. The facility completed the training and the Warden issued a memorandum that refresher training will be provided bi-annually for all Offender Victim Representatives. Addresses and phone numbers for rape crisis centers are posted in the law library, despite the agency not having an MOU with a rape crisis center.

Compliance Determined by:

Senate Bill 1191, Emergency Services for Survivors of Sexual Assault
Administrative Directive 16.03, Evidence Handling
Safe Prison/PREA Operations Manual
Safe Prison PREA Plan
OIG 04.25, Offender Sexual Assault Investigations
CMHC G-57.1, Sexual Assault/Sexual Abuse
Listing of Rape Advocacy Centers
Solicitation Letter to Rape Crisis Centers
Interviews with OIG and facility investigators, Offender Victim Advocates, the PREA Compliance Manager, emergency room staff, and an offender who reported a sexual abuse
Observations on the site tour
Reviewed training records for investigators and Offender Victim Advocate

Standard 115.22 Policies to ensure referrals of allegations for investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Office of the Inspector General (OIG) is an independent office, reporting to the Texas Board of Criminal Justice. This office serves as the investigative and law enforcement entity for the agency. Administrative investigations are conducted at the facility level by trained facility investigators. Criminal investigations are conducted by OIG investigators. If the evidence is sufficient for criminal prosecution, the OIG Office refers the case to the county prosecutor. These referrals are documented and the OIG office maintains contact with the prosecutor's office until the case is resolved. Incidents of alleged sexual abuse (offender-on-offender or staff-on-offender) are reported to the OIG and the Emergency Action Center. The OIG decides if a forensic exam is indicated and instructs staff concerning crime scene preservation, evidence collecting, and the like. The agency policy regarding the referral of sexual abuse or sexual harassment for criminal prosecution is published on the agency website.

During the past year there were thirteen allegations of sexual abuse or sexual harassment. Investigations were reviewed and facility and OIG investigators were interviewed. Of these investigations, five were referred to OIG. There is one open case. There was an immediate response when the report of sexual abuse or harassment was received. Each case was handled in accordance with this standard.

Compliance Determined By:

Board Policy 1.07, Inspector General Policy Statement
Executive Directive PD-29, Sexual Misconduct with Offenders
Administrative Directive 02.15, Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents
AD 16.20, Reporting Incidents/Crimes to the Office of the Inspector General
OIG Procedure 04.05, Offender Sexual Assault Investigations
Safe Prison PREA Plan
SPPOM 05.01, Sexual Abuse Response and Investigation
SPPOM 05.05, Completing the Offender Protection Investigation
Interviews with OIG and facility investigators
Review of investigations of reports of sexual abuse

Standard 115.31 Employee training

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency requires comprehensive PREA training for all employees. This training is provided in pre-service, annual in-service, and monthly during shift turnout. A script of the video entitled, Safe Prisons PREA in Texas was reviewed. This video thoroughly addresses each required provision in this standard. Following the PREA training, each participant documents that they received and understood the training. Medical staff sign attendance rosters and take post-test to verify their understanding of the training. This required training was completed by 99.4% of employees

Executive Directive 12.10, TDCJ Training Database outlines the requirements for entering and maintaining employee training records in the agency database. Employees who are reassigned from facilities housing the opposite gender offenders are provided additional training. The Gender Specific Training schedule was reviewed.

A random selection of training records were reviewed and confirmed the training is being provided as outlined in this standard provision. During random staff interviews, some staff indicated that it was acceptable to use an offender interpreter when an offender is making an allegation of sexual abuse or sexual harassment. To address this issue, this auditor asked that additional training specific to the use of inmate interpreters be provided to staff. The facility provided this training to all shifts and provided shift reports and training attendance rosters. After review of the documentation, this auditor finds the facility in compliance with this standard.

Compliance Determined by:

Gender Specific Training Schedule
Safe Prisons/PREA in Texas – Video Script
AD 12.20, Implementation and Operation of the TDCJ In-Service Training Program for Uniformed and Non-Uniformed Employees
Correctional Training and Staff Development, Pre-Service Training Block 1
Correctional Training and Staff Development, In-service Training,
Correctional Training and Staff Development, Non-Supervisor In-service Training, Safe Prison PREA Program
Correctional Training and Staff Development, Supervisor In-Service Training, Safe Prison PREA Program

Safe Prisons/PREA Plan
Executive Directive PD-29, Sexual Misconduct with Offenders
Executive Directive PD-97, Training and Staff Development
SPPOM 06.01, Unit Safe Prisons/PREA Program Awareness Training
Review of Employee Training Records
Random staff interviews

Standard 115.32 Volunteer and contractor training

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Administrative Directive 7.35, Administration of Volunteer Services requires an agency-wide plan that includes the training of all agency volunteers. The TDCJ Volunteer Training and Orientation Handbook was reviewed and addresses the agency's zero tolerance policy, provides definitions of and consequences for prohibitive behaviors, and details reporting mechanisms for reporting sexual abuse and sexual harassment.

The agency has provided PREA training for 24,514 volunteers and 16 contractors. The level and type of training provided is based on the services provided. Volunteers sign the Volunteer Training and Orientation form acknowledging receipt of the TDCJ Volunteer Training and Orientation Handbook and acknowledging that they attended and understood the training provided. Interviews with volunteers and contract employees support compliance with this standard.

A statement of fact from TDCJ Volunteer Services explains that all 24,514 approved volunteers/contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse/harassment prevention, detection, and response. Approved volunteers/contractors are not limited to specific facilities rather they are approved to serve at all TDCJ facilities to include secured facilities, parole, and/or ISF facilities.

The agency has trained 9,709 volunteers/contractors in the past 12 months (from Sept 2015 – Aug 2016) in agency policies and procedures regarding sexual abuse/harassment prevention, detection, and response. Volunteers/contractors are required to re-train every two (2) years to maintain their approval status.

The level and type of training as it pertains to agency policies and procedures regarding sexual abuse/harassment prevention, detection, and response is the same for all approved volunteers/contractors.

All volunteers/contractors who have contact with inmates have been trained regarding the agency's zero-tolerance policy regarding sexual abuse/harassment and how to report such incidents. The agency maintains documentation confirming that volunteers/contractors understand the training they have received. Each volunteer signs the Acknowledge of Training (AOT) Form after each training session. The AOT Form is filed in the volunteer's central file maintained at TDCJ Volunteer Services in Huntsville, Texas. The volunteer's electronic file is the source to which the facility identifies the approval status of a volunteer. The electronic file is updated by TDCJ volunteer services staff. Interviews with contract employees and volunteers confirmed compliance with this

standard.

Compliance Determined by:

Executive Directive PD-29, Sexual Misconduct with Offenders
AD 02.46, Employees of Private Businesses and Governmental Entities Contracting with the TDCJ
AD 07.35, Administration of Volunteer Services
Safe Prisons/PREA Plan
Letter of Orientation for Special Volunteers
Statement of Fact from TDCJ Volunteer Services
Facilitator's Guide for the Volunteer Services Training Program
Handbook for Volunteers
TDCJ Volunteer Services Plan
Interviews with volunteers and contract employees

Standard 115.33 Inmate education

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Daniel Unit is not an intake facility. During intake offenders are provided PREA information through a pamphlet, Offender Handbook and PREA video. Offenders transferred to the Daniel Unit also receive written PREA information, view the PREA video, and may attend a PREA peer education class. Offender education is documented and is available on the TDCJ data base. This data base maintains records of the offender's participation in training at each facility in which the offender is housed.

There were 923 offenders who received PREA information at intake. This constitutes 100% compliance with this standard provision.

Most non-English speaking offenders in the Texas system are Spanish speaking. All PREA education material, posters, signage, videos, and the like are available in Spanish. The agency has a program for certifying bilingual employees as interpreters.

Offenders who are blind, deaf, or seriously mentally or cognitively impaired are not housed at this facility. Offenders with impaired vision are provided information upon transfer through the PREA video. Offenders with hearing loss receive this information through pamphlets, and the PREA video (closed captioning). Interviews with offenders confirmed that information is presented in a manner that they were able to understand.

PREA information is available to offenders through the Offender Handbook, and PREA Pamphlets and brochures, PREA postings in each housing area, the law library, visitation area, and general library. Offenders new to the facility may also attend a Peer education class. A peer educator was interviewed. He was well informed about PREA and was highly motivated to lead this class.

The PAQ indicated there were 751 offenders admitted to the facility in the past 12 months whose stay was 30 days or more. The PAQ stated only 92 of these offenders received the comprehensive PREA education. This was discussed with the facility PREA manger and the Warden. There was an error on the PAQ, and the corrected percentage of offenders who received the comprehensive PREA training is 100%.

There are several Spanish speaking interpreters at the Daniel facility. While interviewing non-English speaking offenders, a facility interpreter assisted this auditor and demonstrated excellent interpretive skills. The facility attempts to provide a trained interpreter for each shift. Interviews with staff and offenders confirmed that staff interpreters are available when needed.

Compliance Determined by:

AD 06.25, Qualified Interpreter Services, American Sign Language
Safe Prison PREA Plan
SPPOM 06.02, Offender Sexual Abuse Awareness Training
CMHC G-51.1, Offenders with Special Needs
Listing of Staff Who Speak a Language Other than English or Spanish
Offender Handbook
Unit Classification Procedure 5.0, Orientation Procedures
TAAASA Brochure – Prison Rape (English and Spanish)
Interviews with random offenders and peer educators
Observations on the facility tour
Utilization of a trained facility interpreter

Standard 115.34 Specialized training: Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The facility and agency investigators have received the general PREA training provided to all employees and training in conducting administrative and criminal investigations. Facility investigators are responsible for conducting administrative investigations and OIG investigators are responsible for conducting criminal investigations.

Investigators are required to be licensed as peace officers. OIG investigators attend NIC PREA Investigation Training and are tested to ensure the material presented was understood by the investigator. The lesson plan for course 2029, Interview and Interrogation and course 3201 Sexual Assault Investigative Topics were reviewed. Both courses are required for OIG investigators. The specialized training provided to investigators include techniques for interviewing sexual assault victims, proper use of Miranda and Garrity warnings, the dynamics of sexual abuse in confinement settings, evidence collection, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. A training roster was reviewed for each OIG investigator that included the names, date of training, and test score. Training for facility investigators was also reviewed.

Facility investigators attend a course entitled, Safe Prisons/PREA Investigation Training. Training records for facility investigators were reviewed. The agency has 136 OIG investigators and 26 facility investigators who have completed the required training.

Several facility investigators and an OIG investigator were interviewed. The interviews revealed that investigators are well trained and knowledgeable about their responsibilities.

Compliance Determined by:

Board Policy 01.07, Inspector General Policy Statement
OIG 02.15, Training Procedures
Lesson Plan 2029 – Interview and Interrogation
Lesson Plan 3201 – Sexual Assault Investigative Topics
CTSD Lesson Plan – Conducting a Thorough Investigation, (for staff who conduct administrative investigations)
Roster of attendees for the NIC PREA Training
Training records for facility investigators
Interviews with OIG and facility investigators

Standard 115.35 Specialized training: Medical and mental health care

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency has contracted with the Texas Tech University Sciences Center (TTUHSC) to provide medical and mental health care at the Daniel Unit and for providing the specialized training required by the PREA standards, for medical and mental health staff.

There is 19 medical and mental health staff employed at the facility. All medical and mental health staff has received the training required by agency policies. The orientation of new healthcare employees, both full and part-time, includes training in the detection, assessment, and response to offender-victims of sexual abuse and sexual harassment, the preservation of physical evidence, and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. Employees must pass a post test at the conclusion of the training to ensure they understand the material. Annual refresher training is also provided to healthcare employees. Healthcare staff attends the annual PREA refresher training that is provided to all employees. The facility's healthcare providers do not provide forensic exams. These exams are provided by qualified healthcare providers Hendriks Hospital, in Abilene Texas. There is no cost to the offender for these exams.

Interviews with employees and a review of training logs confirmed that healthcare staff is provided the training required by this standard.

Compliance Determined by:

CMHC Policy C-25.1, Orientation Training for Health Services Staff
CMHC Policy C-19.1, Continuing Education/Staff Development
Post Test for Medical and Mental Health staff
Training logs
Interviews with medical and mental health staff

Standard 115.41 Screening for risk of victimization and abusiveness

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

All offenders are assessed for risk of sexual victimization or sexual aggression by sociologists at TDCJ intake facilities. Offenders are reassessed upon transfer to another facility. The Unit Safe Prison/PREA staff complete this assessment the day the offender arrives at the facility. The completed risk screening is provided to the Unit Classification Committee. Sgt. Robert Thompson, the facility PREA Manager conducts the risk screening for incoming offenders.

There were 898 offenders received at the Daniel Unit in the past 12 months, whose length of stay was 72 hours or longer. Of these offenders 100% were assessed for risk levels within 72 hours. Interviews with staff and offenders confirmed that offenders received this screening on the day of their transfer to the Daniel Unit, as required by agency policies.

The agency has developed an excellent screening assessment tool. The Offender Assessment Screening form includes questions regarding an offender's age, mental, physical build, and developmental disabilities, previous incarcerations, violent criminal history, whether the offender has prior convictions of sexual abuse of a child or adult, whether the offender engaged in sexual abuse or violence in an institution, whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; previous sexual victimization and sexual abusiveness. The offender's opinion of their risk of sexual assault or harassment is also considered. A file review is conducted prior to the interview to verify information regarding prior incarcerations, sexual offenses, violent criminal history, prior institutional violence or sexual abuse. The form includes a section of the form includes interviewer follow-up questions, comments, referrals to mental health, and a section for the committee's review and recommendations.

Offenders are not disciplined for refusing to answer or disclose information on the Offender Assessment Screening form. Following the assessment, the Unit Classification Committee meets with the offender; reviews risk assessment information and any additional information received from medical and mental health staff, security, or other sources. Offenders are reassessed if new information is received, upon referral or request, or following an incident of sexual abuse. In the past year, there were no offenders who were required reassessment within 30 days due to additional, relevant information received since intake.

The risk assessment is placed in the offender's classification folder in the Records Office. Access to the risk assessment is restricted.

Compliance Determined by:

Safe Prison/PREA Plan
CMHC E-35.1, Mental Health Appraisal for Incoming Offenders
CMHC A-19, Privacy of Care
CMHC H-61.1, Confidentiality and Release of Confidential Health Information
SPPOM 3.01, Offender Assessment Screening
IPM 5.06, Security Referrals During the Intake Process
IPM-CL-69, Psychological Screening Interview Form
Interviews of staff responsible for risk screening and random offenders

Standard 115.42 Use of screening information

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with

the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

The Unit Classification Committee typically meets with the offender on the day of transfer. The committee uses information from the risk screening to make housing, bed, program, and work assignments. The Safe Prison/PREA Plan requires that these decisions are made on an individual basis. Housing, work, and program placement for transgender and intersex offenders is also done on an individual basis, with consideration given to the offender's view of their safety. The Unit Classification Committee meets with these offenders at least every six (6) months to review any threats to safety experienced by the offender. The offender's opinion concerning their safety is given consideration. The TDCJ does not have dedicated housing for transgender or intersex offenders. All transgender offenders at the Daniel Unit were housed in the general population. During the site visit an interview was completed with the facility PREA compliance manager, who is also responsible for completing the risk screening for all incoming offenders. The previous interview with the PREA Coordinator was also reviewed and interviews were completed for transgender offenders. All interviews supported compliance with this standard.

Compliance Determined by:

Administrative Directive 04.17, Offender Housing Assignment Criteria and Procedures
Administrative Directive 04.18, Offender Jobs: Assignments, Job Descriptions, Selection Criteria, Work Programs And Supervision;
Safe Prison PREA Plan;
SPPOM-03.01 Assessment Screening
SPPOM 3.02, Special Population Review
Unit Classification Procedure 4.0, Offender Housing Assignments
CMHC Policy E-35.1, Mental Health Appraisal for Incoming Offenders
CID Policy 04.01, Intake Procedures
CMHC G-51.11, Treatment of Offenders with Intersex Conditions, or Gender Dysphoria, Formerly Known as Gender Identity Disorder
Interviews with the PREA Coordinator, PREA Compliance Manager (staff who conduct risk screening, and transgender offenders

Standard 115.43 Protective custody

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Safe Prison PREA Plan restricts facilities from placing offenders at high risk for sexual victimization in protective housing unless other housing options are not available to separate the offender from likely abusers. If the assessment of alternative housing options cannot be performed immediately, it must be completed within 24 hours. The offender is placed on transient status where the offender is separated from the general population until alternative housing can be arranged, not to exceed 24 hours. Offenders at high risk of victimization will only be assigned to protective custody while an alternative means of separation is arranged, not to exceed 30 days.

The Administrative Segregation Plan outlines the privileges afforded to those offenders placed in

protective custody to ensure sexual safety. The plan directs the units to provide out of cell recreation seven days per week for one hour or five days per week for two hours per day. Outside recreation is available weekly. Recreations and exercise equipment is provided. Offenders are afforded library, visitation, and commissary privileges. If privileges are restricted, the facility must document the specific opportunities that have been restricted, and the reason(s) and duration of the restrictions. The Administrative Segregation Plan requires that the Unit Classification Committee will conduct an initial review of the protective custody placement within seven days. A document review is conducted every seven days, thereafter for 60 days. After the initial 60 days, the offender is reviewed every 30 days to determine if there is a continuing need for separation of the offender from general population.

There have been no offenders at high risk of sexual victimization placed in involuntary segregation or protective custody during this audit period. Staff who supervise segregation were interviewed as well as the facility Warden. Segregation rosters were reviewed. Interviews and record review supported compliance with this standard

Compliance Determined by:

Safe Prison/PREA Plan
Administrative Segregation Plan
Segregation rosters
Interview with staff who supervise segregation and the facility Warden

Standard 115.51 Inmate reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for relevant review period)
- Does Not Meet Standard (requires corrective action)

Offenders may report sexual abuse, sexual harassment, extortion, violence, or retaliation to any correctional staff, facility administrators, the Safe Prison/PREA Management Office, or through a third party, the grievance procedure, or anonymously. Information about reporting options is available to the offender in the Offender Handbook, PREA pamphlets, and postings in the facility. In addition, this information is provided through the PREA video which is shown at intake and upon transfer.

Board policy requires that correspondence sent to the Office of the Inspector General or the PREA Ombudsman is considered special correspondence and may be sealed by the offender. The office of the Inspector General and the PREA Ombudsman report to the Board of Criminal Justice and are considered an independent entity. Writing supplies and postage is provided for indigent offenders.

Staff accepts reports from offenders verbally, in writing, anonymously, and through a third party. Staff interviews indicated that verbal reports are documented immediately. Staff is able to privately report to the Office of the Inspector General and the PREA Ombudsman. Most staff felt they could make private reports to the facility administration as well.

Compliance Determined by:

Executive Directive 2.10 Prison Rape Elimination Act Complaints and Inquiries
Board policy, 3.91, Uniform Correspondence Rules
Administrative Directive 14.09, Postage and Correspondence Supplies

Safe Prison PREA Plan
SPPOM 05.05, Completing the Offender Protection Investigation
General Information for Families and Friends Pamphlet
TBCJ PREA brochure
PREA Postings
Interviews with random staff and offenders
Interview with the Warden

Standard 115.52 Exhaustion of administrative remedies

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Board Policy establishes procedures for the handling of grievances filed by offenders. The Safe Prison/PREA Plan requires that a time limit will not be imposed for filing grievances that allege sexual abuse. Offenders are not required to utilize the informal grievance process prior to filing a formal grievance. Grievances related to sexual abuse are considered emergency grievances and must be completed within 40 days. Extensions for these grievances are not allowed. The time limit does not include the time period in which the offender is preparing an appeal. If the offender does not receive a response to a grievance within the allotted time period, the offender may consider the absence of a response to be a denial at that level. The plan states that offenders who allege sexual abuse may submit a grievance to someone other than the staff member who is the subject of the grievance. The plan also prohibits the referral of the grievance to a staff member who is the subject of the sexual abuse grievance.

If the grievance alleges imminent sexual abuse, the grievance is forwarded to a level of review for immediate corrective action. An initial response will be rendered within 48 hours of receipt and a final decision within five working days. The initial response and the final response will document whether the offender is in substantial risk of imminent harm and the action taken.

Third parties can assist an offender in filing a grievance related to sexual abuse or may file a grievance on behalf of an offender for allegations of sexual abuse, sexual contact, or sexual assault. Third parties include fellow offenders, staff members, family members, attorneys, or advocates. The named offender will be informed of the grievance and given the opportunity to accept or decline an investigation of the grievance. If the offender chooses to have the matter investigated, the offender is required to complete a grievance form. The offender's decision is documented on the Third Party Preliminary Investigation form.

The grieving offender will not be disciplined for filing a grievance related to sexual abuse unless the grievance was filed in bad faith. PREA related grievances were reviewed and support compliance with this standard.

There were three grievances alleging imminent sexual abuse. Staff responded immediately to all of these grievances.

Compliance Determined by:

Board Policy 3.77, Offender Grievances

Administrative Directive-03.77, Offender Grievances,
Review of offender grievances
OGOM 1.04, PREA Allegations
OGOM 4.00, Grievance Timelines
OGOM 9.0, Third Party Grievances
Offender grievance logs
Safe Prisons PREA Plan

Standard 115.53 Inmate access to outside confidential support services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency has not been able to obtain an MOU with a rape crisis center for the Daniel Unit. The names, addresses, and phone numbers of rape crisis centers in Texas are posted in the law library for access by offenders. Offenders can correspond with these crisis centers by having a third party call or write the crisis center or the offender can correspond with the rape crisis center through the PREA Ombudsman. Correspondence with the PREA Ombudsman is considered special correspondence. Special correspondence is sealed by the offender and not inspected. The PREA Ombudsman will forward correspondence between the offender and the rape crisis center. The rape crisis center is not obligated to report the abuse.

The agency has made considerable efforts to obtain a Memorandum of Understanding with rape crisis centers across the state. William Stephens, previous Correctional Institutions Division Director and agency PREA Coordinator sent solicitation letters to all rape crisis centers throughout Texas that are affiliated with the Texas Association against Sexual Assault. The agency PREA Manager recently attended the March 2016 Texas Association of Sexual Assault conference. The Agency PREA Manager provided an informational seminar regarding the scope of MOU's with the TDCJ, handling of offender reports and the like, in an effort to encourage rape crisis centers to consider entering into an MOU with the TDCJ.

Due to the limited response from the rape crisis centers, the TDCJ developed a training program to train selected employees as Offender Victim Representatives (OVR). Staff is trained to provide victim support for offenders who have been victims of sexual assault. The OVR provides support through the forensic exam and investigatory interviews. The Safe Prison/PREA Operations Manual 02.02, Offender Victim Representative, outlines the selection, training, and duties of the Offender Victim Representative.

An interview was conducted with an Offender Victim Advocate and training records were reviewed. Following the interview this auditor discussed concerns that refresher training was needed. Refresher training was provided after the site visit. Verification of training was provided. In addition, Warden Morris issued a memorandum that requires refresher training biannually for Offender Victim Representatives.

Most offenders interviewed were aware of how to obtain the address and phone number of rape crisis centers in Texas but offenders and staff did not respond affirmatively to questions regarding the nature of the services because these services are provided internally through the contract mental health staff.

Compliance Determined by:

Safe Prisons PREA Plan
Board Policy 03.91, Uniform Offender Correspondence Rules
Offender Orientation Handbook
Executive Directive 02.10, Prison Rape Elimination Act Complaints and Inquiries
Listing of Rape Crisis Centers within the state
Solicitation Letters
MOU Example from another unit
Safe Prison/PREA Operations Manual 02.02, Offender Victim Representative
Interviews with random staff and offenders and Offender Victim Advocates
Review of training curriculum and training records for Offender Victim Representatives
Review of OVR refresher training
Review of memorandum form Warden concerning refresher training for OVR.

Standard 115.54 Third-party reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Third parties can contact the PREA Ombudsman or the Office of the Inspector General to report sexual abuse or harassment. The agency website provides an on-line brochure entitled, General Information Guide for Families of Offenders. The address, phone number and email address for the PREA Ombudsman is available in this on-line brochure. Information regarding the Office of the Inspector General is also available on the agency website and includes contact information. PREA informational postings which include reporting options are posted in the visitation area as well.

Compliance Determined by:

SPPOM-04.02, Receiving Allegations of Sexual Abuse from an Outside Agency
On-line Brochure entitled, General Information for Families of Offenders
Executive Directive 02.03, Ombudsman Program
Executive Directive 02.10, Prison Rape Elimination Act Complaints and Inquiries
Observations of postings throughout the facility
Safe Prison/PREA Plan

Standard 115.61 Staff and agency reporting duties

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency directives require all staff to immediately report any knowledge, suspicions, or information regarding sexual assault, sexual harassment, retaliation against staff or offenders for reporting, and any neglect on the part of staff that may have contributed to an incident of sexual abuse or harassment, or retaliation on any unit whether or not it is a TDCJ facility. All such reports are forwarded to facility investigators and OIG investigators.

The Safe Prison/PREA Plan prohibits staff from revealing any information regarding a sexual abuse report to anyone other than a supervisor or officials and only to the extent necessary to make informed treatment, investigative, security, or management decisions. Random interviews with staff support compliance with this standard.

The facility does not house youthful offenders but the agency has procedures in place that require the Department of Family Protective Services to be contacted in the event the agency has sufficient grounds to believe a wrongful incident of abuse, exploitation, or neglect has occurred.

Healthcare policies require health care staff to notify the Security Supervisor and physician/mid-level practitioner of any offender complaints of sexual abuse/assault. Prior to an interview or evaluation mental health staff must advise the offender of the limits of confidentiality and asked to consent to the interview. This informed consent is documented in the health record.

Interviews were conducted with medical and mental health staff, the facility Warden, and random staff. A previous interview with the PREA Coordinator was also reviewed. All interviews supported compliance with this standard.

Compliance Determined by:

Executive Directive PD-29, Sexual Misconduct with Offenders

Safe Prison/PREA Plan

Administrative Directive 16.20, Reporting Incidents/Crimes to the Office of the Inspector General

Correctional Managed Health Care Policy G-57.1, Sexual Assault/Sexual Abuse

CMHC 35.2, Mental Health Evaluations

SPPOM 05.01, Sexual Abuse Response and Investigation

CPOM 02.05, Requirements to Contact Department of Family Protective Services

Interviews with the facility Warden, random staff, medical and mental health personnel and review of a previous interview with the agency PREA coordinator

Standard 115.62 Agency protection duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Safe Prison PREA Operations Manual requires the first security officer to learn of an alleged sexual abuse to immediately separate the victim from the alleged abuser. There were no incidents in which it was determined that the offender was at substantial risk of imminent sexual abuse. The interview with the Warden and staff and a review of agency policies supported compliance with this standard.

All staff interviewed was aware of their responsibility to protect the alleged victim and reported that they would immediately separate the victim from the alleged abuser.

Security staff is provided a pocket guide that outlines the appropriate steps to take if they receive a report of sexual abuse. A review of investigations confirmed that, when applicable, alleged victims are

immediately separated from the alleged abuser.

Compliance Determined by:

AD 02.15, Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents

Safe Prison PREA Operations Manual - 05.01, Sexual Abuse Response and Investigation

Safe Prison PREA Operations Manual - 05.03, Time Frames Associated with Offender Protection Investigations

Interviews with the facility Warden and random staff

Review of investigations

Standard 115.63 Reporting to other confinement facilities

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Safe Prison PREA Management Office coordinates the reporting of allegations of sexual abuse occurring at another facility outside of TDCJ. Notification is made within 72 hours, to the facility or designated department within the agency in which the alleged abused occurred. Notification is documented and maintained in the Safe Prison PREA Management Office. An example of the notification letter was reviewed. There were no allegations received by the facility that an offender was abused while confined at another facility.

If the Warden or department head receives notification from an outside agency that an offender in the outside agency's custody alleged sexual abuse while assigned to TDCJ custody, shall ensure the allegation is forwarded to the PREA Ombudsman Office for possible investigation. There were no reports from outside agencies during the past 12 months. There were no such reports received from facilities within the TDCJ during the past 12 months.

Compliance Determined by:

Board Policy 01.07, Inspector General Policy Statement

Board Policy 02.09, Prison Rape Elimination Act Ombudsman Policy Statement

AD 16.20, Reporting Incidents/Crimes To The Office Of The Inspector General

Safe Prison/PREA Operations Manual 4.01, Reporting Incidents of Sexual Abuse to Other Confinement Agencies

Letter format for reporting allegations to an outside agency

Safe Prison/PREA Operations Manual 4.02, Receiving Allegations of Sexual Abuse from an Outside Agency

Safe Prison/PREA Operations Manual 5.01, Sexual Abuse Response and Investigation

Safe Prison/PREA Operations Manual 05.05, Completing the Offender Protection Investigation

Listing of Sexual Abuse Allegations

Review of previous interview with the agency head

Interview with the facility Warden

Standard 115.64 Staff first responder duties

- Exceeds Standard (substantially exceeds requirement of standard)

- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency policies require the first Security Officer to receive notification of an alleged sexual abuse to immediately separate the victim from the alleged abuser. A pocket size card is provided to staff outlining first responder duties. The Security Supervisor will conduct an initial interview to determine the nature of the abuse, the date, time, location of the incident and the identity of the assailant. If the abuse occurred within 96 hours of the report, the victim and alleged abuser are advised not to brush teeth, change clothing, wash, urinate or defecate, smoke, drink or eat. The Security Supervisor will contact OIG, the duty Warden, highest ranking Security Supervisor, medical and mental health staff, the Offender Victim Representative, the Emergency Action Center and the Unit Safe Prison/PREA Manager. OIG determines if the victim needs a forensic exam, and whether the alleged abuser should be placed in a dry cell to preserve evidence provides. The OIG provides instruction for crime scene preservation.

Agency policies also provide comprehensive instructions for evidence handling and crime scene preservation in the event a criminal act is committed on TDCJ property.

There were thirteen incidents in which an allegation of sexual abuse was received. There were nine of these incidents in which the first responding Security Officer separated the victim from the alleged abuser. When applicable, the security officer preserved the crime scene, separated the alleged victim and requested the victim not to take measures that could destroy physical evidence. The security officer also ensured the abuser did not take any actions that could destroy physical evidence. Of the thirteen (13) incidents, 12 occurred within a time period that allowed for the collection of evidence. The investigations were reviewed and found to be in compliance with this standard.

The Safe Prison/PREA Plan requires that, if the first staff responder is not a correctional officer, the responder shall monitor the victim to ensure physical evidence is not destroyed and shall immediately notify a correctional officer. There were no incidents during this audit period in which the first person to receive a report of sexual abuse, was not a correctional officer.

The review of agency policies, interviews with staff and offenders supported compliance with this standard.

Compliance Determined by:

Administrative Directive 16.03, Evidence Handling
 Safe Prison/PREA Operational Manual 05.01, Sexual Abuse Response and Investigation
 Safe Prison/PREA Plan
 OIG OPM 04.05, Offender Sexual Assault Investigations
 Review of investigations
 Interviews with first responders, investigative staff, random staff, and offender who reported a sexual abuse

Standard 115.65 Coordinated response

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

The Safe Prison/PREA Operational Manual outlines the agency plan for a coordinated response to allegations of sexual abuse. The plan addresses the roles and duties of first responders, medical and mental health practitioners, Security Supervisors, investigators and Offender Victim Advocates. The specific responsibilities for each department are outlined in separate policies i.e. medical and mental health response is outlined in the healthcare policy, investigators duties in OIG policies. The SAFE Prison PREA Plan is a very comprehensive plan that provides specific instructions that are appropriate for all facilities. The facility plan was reviewed.

A review of agency policies, and the facility PREA plan, and interview with the Warden supported compliance with this standard.

Compliance Determined by:

Safe Prison/PREA Operational Manual 5.01, Sexual Abuse Response and Investigation
Safe Prison/PREA Plan
Review of facility PREA plan
Interview with Warden

Standard 115.66 Preservation of ability to protect inmates from contact with abusers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)
- X Not Applicable

This standard does not apply because the Texas Department of Criminal Justice does not have collective bargaining agreements. The agency has the authority to remove any employee alleged to have committed an act of sexual abuse from contact with offenders during the investigation process.

Compliance Determined by:

Executive Directive PD-22, General Rules of Conduct and Disciplinary Guidelines for Employees
Executive Directive
Texas Attorney General Webpage

Standard 115.67 Agency protection against retaliation

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Executive Directive PD-22, General Rules of Conduct and Disciplinary Guidelines for Employees

mandates that retaliation will not be tolerated. Rule 20 addresses violations of statutory authority, court order, rules, regulations and policies. Rule 22a addresses harassing or retaliation against another individual. Both rules are level 2 offenses. Disciplinary action for these offenses include probation up to nine (9) months, withdrawal of pay increases, suspension without pay up to twenty work days, reduction in pay, involuntary demotion, and/or dismissal.

The Unit Safe Prison PREA Manager, Sgt. Robert Thompson is responsible for monitoring retaliation at the Daniel Unit. He monitors retaliation against both offenders and staff. He understands his responsibilities. Documentation of his monitoring activities was reviewed.

The Safe Prison/PREA Plan allows for housing changes or transfers for offender victims or abusers, removal of alleged staff or offender abusers from contact with victims, and emotional support services for offenders or staff that fear retaliation for reporting sexual abuse or sexual harassment, or for cooperating with investigations.

Agency policies require the facility Warden and the Unit Safe Prison PREA Unit Manager to monitor offenders or staff who have reported a sexual abuse or sexual harassment, or witnesses for a minimum of 90 days. Monitoring shall be continued beyond the initial 90 days on a case-by-case basis. Monitoring includes a review of disciplinary reports, housing or program changes, and negative performance evaluations, reassignment of staff. Monitoring is terminated if the agency determines the allegation is unfounded.

Interviews with the Unit Safe Prison PREA Manager, and an offender who reported a sexual abuse confirmed compliance with this standard.

Compliance Determined by:

Executive Directive PD 13, Sexual Harassment and Discourteous Conduct of a Sexual Nature
Executive Directive PD-22, General Rules of Conduct and Disciplinary Actions for Employees
Executive Directive PD-29, Sexual Misconduct with Offenders
Executive Directive PD-31, Discrimination in the Workplace
Safe Prison PREA Plan
Safe Prison PREA Operations Manual 02.04, Intervention Practices
Safe Prison PREA Operations Manual 05.08, 90 Day Monitoring for Retaliation
Interviews with Agency Head, Warden, staff monitoring retaliation, the PREA Manager, and offender who reported a sexual abuse
Review of documentation of retaliation Monitoring

Standard 115.68 Post-allegation protective custody

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Safe Prison PREA Plan mandates that offenders who are at risk of sexual victimization will not be placed in protective custody unless an assessment of all available alternatives have been made and it is determined there is no alternative means of separation available to protect the offender from likely abusers. If an offender is placed in involuntary housing, the offender is reviewed every seven days for the first 60 days and every 30 days thereafter. The PAQ stated there were no offenders held in involuntary segregated housing during this audit period. Interviews with the Warden and staff assigned to supervise segregation confirmed compliance with this standard. There were no offenders

in segregation for risk of sexual victimization.

Compliance Determined by:

Administrative Segregation Plan
Administrative Directive 04.63, Transient Status Offenders
Administrative Directive 03.50, Administrative Segregation
Safe Prison PREA Plan
Guidelines for Administrative Segregation Committee Members
Interviews with the Warden and segregation staff

Standard 115.71 Criminal and administrative agency investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Board policy authorizes the Office of the Inspector General to conduct independent investigations within the TDCJ. The Inspector General reports to the Board of Criminal Justice through the Board Chair. The Office of the Inspector General conducts all investigations in which a crime may have been committed. The facility investigators conduct administrative investigations.

The Safe Prison PREA Plan states investigations of sexual abuse and sexual harassment will be conducted promptly, thoroughly and objectively for all allegations to include third-party and anonymous reports. Investigators are required to complete specialized training in conducting sexual abuse investigations in a correctional setting. The training curriculum for OIG Course 3201 Lesson Plan, Sexual Assault Investigative Topics was reviewed. This class is required for OIG investigators. In addition, the training curriculum, CTSD Lesson Plan and Slide Show, Conducting a Thorough Investigation was also reviewed. This training course is required for administrative investigators at the facility level. Training records for OIG and facility investigators were reviewed and confirm that investigators have received the required sexual abuse investigation training.

The Office of Inspector General policies outline the procedures for conducting sexual assault investigations and documenting the investigation. The policy provides specific instructions for gathering DNA evidence and determining if a forensic exam is indicated.

The credibility of a witness is determined on an individual basis and is not determined by the person's status as offender or staff. Offenders reporting sexual abuse are not required to submit to a polygraph or other truth telling device as a condition to proceed with the investigation. Criminal investigations are documented and include a thorough description of physical, testimonial, and documentary evidence and copies of all documentary evidence when feasible. A review of investigation reports support compliance with this standard.

OIG 3.72, Records Retention – PREA states that all criminal and administrative investigations of sexual assault related offenses will be retained for as long as the alleged abuser(s) is incarcerated plus five years and as long as the staff is employed plus five years. Prior to destruction of the records, the Records Supervisor must confirm that the offender is no longer incarcerated or staff member is no longer employed and that five years has passed since the release or termination.

The Safe Prison PREA Plan requires that the departure of the alleged assailant or victim from employment or custody of the TDCJ shall not be the basis for terminating an investigation.

Interviews were conducted with facility investigators and a phone interview was conducted with an OIG investigator. Investigators are well trained in investigation techniques and procedures and PREA standard requirements. Interviews were also conducted with the Warden, and PREA Manager and offender. The requirements of the PREA standards regarding investigations are fully incorporated into the agency's policy and practice.

Compliance Determined by:

Executive Directive PD-29, Sexual Misconduct with offenders
Board policy 01.07, Inspector General Policy Statement
Administrative Directive 2.15, Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents
Administrative Directive 16.03, Evidence Handling
Administrative Directive 16.20, Reporting Incidents/Crimes to the Office of the Inspector General
CTSD Lesson Plan and Slide Show, Conducting a Thorough Investigation
Safe Prison PREA Plan
Safe Prison Operations Manual 05.05, Completing the Offender Protection Investigation
Safe Prison Operations Manual 05.11, Completing the Staff-on-Offender Sexual Abuse Investigation Worksheet
OIG 3.72, Records Retention – PREA
OIG 04.05, Offender Sexual Assault Investigations
OIG OPM 02.15, Training Procedures
OIG OPM 05.10, Property and Evidence Control
OIG OPM 05.15, Statements and Confessions
OIG Course 3201 Lesson Plan, Sexual Assault Investigative Topics
Records Retention Schedule
Interviews with investigative staff, offender, Warden PREA Coordinator and compliance manager
Review of training records

Standard 115.72 Evidentiary standard for administrative investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Safe Prison PREA Plan requires that no standard higher than the preponderance of the evidence will be imposed when determining if sexual abuse or sexual harassment occurred. The curriculum for Conducting a Thorough Investigation was reviewed and addresses this provision. Training records and interviews with investigators supported compliance with this standard.

Compliance Determined by:

Safe Prison PREA Plan
CTSD Lesson Plan – Conducting a Thorough Investigation
Safe Prison PREA Operations Manual 05.05, Completing the Offender Protection Investigation
Training Records – Investigators
Interviews with OIG and administrative investigators

Standard 115.73 Reporting to inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Safe Prison PREA Plan requires that offenders who have made sexual abuse allegations will be informed by the Unit Classification Committee if the allegations were found to be substantiated, unsubstantiated, or unfounded. The facility provided an example of this notification form, which is in English and Spanish.

If the alleged abuser was staff, the Warden is charged with informing the offender if the staff is no longer assigned to the facility or if the staff is no longer working for TDCJ. If the abuse was determined to be criminal, the Safe Prison PREA Management Office informs the offender of the outcome of the criminal investigation.

Required notifications are documented. The duty to provide notifications terminates if the offender is no longer in TDCJ custody. The investigations and offender notifications were reviewed and interviews with the Warden, investigative staff, and an offender who reported a sexual abuse. The facility is in compliance with this standard.

Compliance Determined by:

Safe Prison PREA Plan

Safe Prison PREA Operations Manual 05.10, Reporting Sexual Abuse Criminal Case Status to Offenders

Statement of Fact from Agency Safe Prison PREA Manager

Reviewed Unit Classification Committee Notification Form

Reviewed completed Offender Notification Forms

Interviews with the facility Warden, investigative staff, and an offender who reported a sexual abuse

Review of investigations

Standard 115.76 Disciplinary sanctions for staff

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Executive Directive PD-22, General Rules of Conduct and Disciplinary Guidelines for Employees states the sexual misconduct with an offender is considered a level one offense and dismissal is the only disciplinary measure allowed. Only the Executive Director, Deputy Executive Director, or appropriate Division Director is allowed to impose a less severe disciplinary action. This directive also addresses harassment and retaliation. These violations may be considered level one or level two offenses. When imposing sanctions, consideration is given to the circumstance and nature of the offense, past history, and sanctions for comparable offenses.

The contractor is responsible for notifying licensing bodies of any terminations for violations of sexual abuse or sexual harassment policies or resignations by staff that would have been terminated if not for their resignation.

During this audit period there were no incidents of substantiated allegations against staff. Appropriate policy and procedures are in place to address staff sexual misconduct or abuse in accordance with the PREA standards.

Compliance Determined by:

Executive Directive PD-13, Sexual Harassment and Discourteous Treatment of a Sexual Nature
Executive Directive PD-22, General Rules of Conduct and Disciplinary Guidelines for Employees
Executive Directive PD-29, Sexual Misconduct with Offenders
AD 16.20, Reporting Incidents/Crimes to the Office of the Inspector General
Windham Board Policy 07.15, Sexual Misconduct with Offenders
Windham Board Policy 07.44, Professional Standards of Conduct and Disciplinary Guidelines
Discussions with Unit Safe Prison PREA Manager and Warden

Standard 115.77 Corrective action for contractors and volunteers

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Volunteer Services Plan explains the agency's policy of zero tolerance, explanation of prohibited behaviors, and the consequences for engaging in these behaviors. The plan also states that violators will not be allowed to continue to volunteer with the TDCJ and may face criminal prosecution. The Safe Prison PREA Plan states that volunteers or contractors who engage in sexual abuse will be reported to relevant licensing bodies. This plan mandates that the units are to take appropriate remedial measures and shall consider whether to prohibit further contact with offenders, in the case of any other violation of TDCJ sexual abuse or sexual harassment policies by a contractor or volunteer.

During this audit period, there were no incidents of volunteers or contractors reported to law enforcement agencies for engaging in sexual abuse of an offender. The lesson plan for the PREA Volunteer Training was comprehensive and included all provisions for this standard. Interviews with a volunteer, the facility Warden, and contract employees confirm compliance with this standard.

Compliance Determined by:

Executive Directive PD-29, Sexual Misconduct with Offenders
Safe Prison PREA Plan
Chaplaincy Manual 13.03, Ecclesiastical Endorsement
Volunteer Services Plan
Volunteer Training Facilitators Guide
Acknowledgment of Volunteer Training/Orientation form
Email- PREA Violations by Contract Staff
Email- PREA Violations by Volunteers
Email-PREA Violations by Windham School District Staff
Interviews with the Warden, volunteer and contract staff
Review of training and orientation provided for contractors and volunteers

Standard 115.78 Disciplinary sanctions for inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Safe Prison PREA Plan requires that offenders should face disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual abuse, sexual harassment, extortion, substantiated acts of violence or following a criminal finding of offender-on-offender sexual abuse. Sanctions should be appropriate to the nature of the abuse committed, the offender's disciplinary history, and sanctions imposed for comparable offenses by other offenders with similar histories. The disciplinary process considers whether an offender's mental disabilities or mental illness contributed to his behavior when considering what sanction, if any, should be imposed. Consensual sex between offenders is a violation of agency rules and may result in disciplinary sanctions. Offenders may be disciplined for sexual contact with staff if there is a finding that the staff did not consent. If the offender makes a report of sexual abuse in good faith, upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying even if the investigation finds the allegations could not be substantiated for the purpose of disciplinary action. Although there were 13 allegations of sexual abuse during this audit period, there have been no administrative or criminal findings of offender-on-offender or staff-on-offender sexual abuse at the Daniel Unit.

The facility provides therapy, counseling or other interventions to address and correct underlying reasons or motivations for the abuse, if the offender is willing to participate in the treatment but the offender is not denied access to programs or other benefits for refusing to participate in the treatment offered. The facility Warden and mental health worker supported compliance with this standard.

Compliance Determined by:

Safe Prison PREA Plan
 Correctional Institutions Division: Disciplinary Rules and Procedures for Offenders
 SOTP 01.01, Overview of the Sex Offender Treatment Program (SOTP-18
 and SOTP-9)
 CMHC E-35.1, Mental Health Appraisal for Incoming Offenders
 Interviews with the Warden and mental health worker

Standard 115.81 Medical and mental health screenings; history of sexual abuse

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Safe Prison PREA Plan requires that offenders are offered a referral to a medical or mental health practitioner if the screening tool indicates the offender has experienced prior victimization in an institutional setting or in the community. The plan also states that if the screening indicates the offender has previously perpetrated sexual abuse, in an institutional setting or the community, the offender is offered a referral to a medical or mental health practitioner. The risk screening tool notes the date of the referral, and requires the interviewer to attach the completed mental health referral

form.

The mental health department provides services to the referred offender within the 14 day time period. Interviews with staff who conduct the risk screening and medical and mental health staff support compliance with this standard.

Information concerning sexual victimization or abusiveness is limited to medical and mental health staff except as needed for housing, work, education, and program assignments. If the offender reports a prior sexual victimization that did not occur in an institutional setting, the mental health staff obtains informed consent before reporting this information.

Compliance Determined by:

Safe Prison PREA Plan
CMHC E-35.1, Mental Health Appraisal for Incoming Offenders
CMHC E035.2, Mental Health Evaluation
Offender Assessment Screening form
Mental Health Outpatient Clinic Notes
CMHC I-70.1, Informed Consent
Review of completed offender screening forms
Interview with Healthcare staff and staff completing risk screening

Standard 115.82 Access to emergency medical and mental health services

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Safe Prison Operations Manual and CMHC G-57.1, Sexual Assault-Sexual Abuse, require that an offender, who reports sexual abuse or assault will immediately be evaluated, examined, and referred for required services. The nature and scope of services are provided according the professional judgment of the medical and mental health practitioners. Forensic examinations, if indicated, are provided at Hendriks Hospital in Abilene, Texas. Sexual assault victims are provided venereal disease testing and treatment, to include prophylactic treatment.

First responders interviewed were aware of their responsibilities regarding reports of sexual abuse. Offenders are not charged for these services or denied services if they refuse to name the abuser or cooperate with the investigation.

Compliance Determined by:

Safe Prison Operations Manual
CMHC G-57.1, Sexual Assault-Sexual Abuse
Interviews with medical, mental health staff and first responders

Standard 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with

the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

The Safe Prison PREA Plan requires that offenders who have been victimized by sexual abuse in any prison, jail, lock-up, or juvenile facility will be offered medical and mental health evaluation and treatment, as appropriate. These services include treatment plans, follow-up services, and referrals for continued care upon transfer to other units or release from custody. Victims of sexual abuse during incarceration are offered tests for sexually transmitted infections as medically appropriate. Treatment services are provided without cost to the offender, regardless of whether the victim names the abuser or cooperates with the investigation. A mental health evaluation of all known offender-on-offender abusers shall be attempted within 60 days of learning of the abuse. Treatment is offered when appropriate in accordance with CMHC policies.

Review of policies and interviews with medical and mental health staff indicates that care is consistent with or exceeds the community level of care.

Compliance Determined by:

Safe Prison PREA Plan

CMHC E-32.1, Receiving, Transfer and Continuity of Care Screening

CMHC E 44.1, Continuity of Care

Interviews with medical and mental health staff

Standard 115.86 Sexual abuse incident reviews

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Safe Prison PREA Plan requires units to conduct incident reviews for all allegations of sexual abuse and staff sexual harassment, unless the allegation was determined to be unfounded. All incidents are report to the Emergency Action Center. The Warden is required to conduct the incident review and forward the completed report for additional comments to the Regional Director, PFCMOD Deputy Director, or department head within 10 working days after the notification to the Emergency Action Center. If there are no recommendations or corrective action, the report and all attachments are sent to the EAC within 20 days of the notification to the EAC. The EAC maintains all agency incident reviews in accordance with the records retention policy.

If the report contains recommendations or corrective actions a written 90-day follow-up report is prepared by the Regional Director, PFCMOD Deputy Director, or department head. The completed report must be submitted to the Deputy Director of prison and jail operations, or the PFCMOD Division Director and the appropriate Division Director or designee within 90-days of the notification to the Emergency Action Center.

There were 8 incident reviews completed during this audit period (this excluded unfounded reports). Each review was completed within the required 30-day period. A review of incident review reports during this audit period included: consideration as to whether the allegation or investigation indicated a need to change policy; whether the incident was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status or perceived status, gang affiliation, or otherwise caused by other group dynamics at the facility; an inspection of the

area was completed and addressed whether there were physical barriers in the area abled abuse; staffing levels were assessed; the adequacy of monitoring technology in the area.

Compliance Determined by:

Safe Prison PREA Plan

Interviews with Incident Review Team members

Administrative Directive 02.15, Operations of the EAC and Reporting Procedures for Serious or Unusual Incidents

Review of Incident Review Reports

Standard 115.87 Data collection

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Emergency Action Center is responsible for receiving reports of all serious or unusual incidents, reporting this information to designated administrators, providing a monthly report and providing Executive services with the information necessary to prepare statistical reports. This information is also provided to the Safe Prison PREA Operations Office. The Safe Prison/PREA Operations office enters the information into the Safe Prisons Sexual Assault database. This office receives a monthly report from each unit (private facilities are included) and compiles this information as well as the EAC data, and information received from OIG. This data is analyzed and evaluated for trends in sexual abuse, sexual harassment, and extortion. This office identifies trends in time of day, locations, and demographics, related to sexual abuse victims and assailants, and custody class. A monthly report is sent to the Correctional Institutions Division directors. The agency provided the 2014 Survey of Sexual Violence for review.

Compliance Determined by:

Administrative Directive 02.15, Operations of the Emergency Action Center and Reporting Procedures for Serious or Unusual Incidents

Safe Prison/PREA Operations Manual 01.01, Safe Prisons/PREA Management Office

Survey of Sexual Violence, 2014

Safe Prison/PREA Plan

Compliance Determined by:

Standard 115.88 Data review for corrective action

- Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency provided the Safe Prisons Program report for the 2015 fiscal year. The reports include

data collected and aggregated in order to assess and improve the effectiveness of its Safe Prisons/PREA Plan. The report is comprehensive to include the identification of problem areas, on-going corrective action, and includes information by facility as well as the agency as a whole. The report includes comparison of the current data and corrective actions with prior years and provides an overall assessment of the agency's progress in addressing sexual abuse. The report is available on the agency website.

Compliance Determined by:

Safe Prisons/PREA Annual Report
Agency website

Compliance Determined by:

Standard 115.89 Data storage, publication, and destruction

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Safe Prison PREA Plan requires that all data collected shall be maintained for at least ten years after the date of the initial collection, unless federal, state, or local law requires otherwise. The Records Retention Schedule was reviewed and is consistent with this policy.

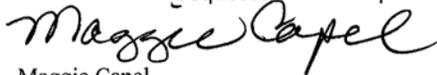
Compliance Determined by:

Safe Prison/PREA Plan
Records Retention Schedule

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.



Maggie Capel

Auditor Signature

02/15/2017

Date